

238293

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

COPY

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

Posted: lod

Dept: S.A/ORS

Date: 8/14/12

Time: 1:10

DOCKET

NUMBER: 2011-293-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: VINAY, SCOTT

Telephone: (843) 926-0513

Address: 7632 VALLEYVIEW CIRCLE
NORTH CHARLESTON, SC 29418

Fax:

Other:

Email:

INFO@DRIVINGMATTERS.DAILY.COM

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application - Class C Taxi
- ☐ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☐ Application - Class C Non-Emergency
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application

- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded
- ☐ Request for Cancellation of Certificate
- ☒ Request for Suspension
- ☐ Request for Reinstatement
- ☐ Request for Name Change on Certificate

- ☐ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: _____

RECEIVED

AUG 14 2012

PSC SC
MAIL / DMS

RECEIVED
AUG 14 2012
PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

REQUEST FOR SUSPENSION FORM (ORS Rev 3-2-10)

File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
---	--

DATE: 8/13/12

Please consider this as my Request for **Suspension** of:

- ☐ Class C Taxi Certificate Number _____
- ☒ Class C Charter Certificate Number 8477
- ☐ Class C Charter Bus Certificate Number _____
- ☐ Non-Emergency Certificate Number _____
- ☐ Class E Household Goods Certificate Number _____
- ☐ Class E Hazardous Wastes Certificate Number _____

RECEIVED

AUG 14 2012

PSC SC
MAIL / DMS

I request that my certificate be suspended until 7/31/13

Date: (XX/XX/XXXX)

DRIVING MIZZ DAIZY LLC
(Name of Company)

D/B/A _____
(If applicable)

7632 VALLEYVIEW CIRCLE
(Street and or Mailing Address)

NORTH CHARLESTON, SC 29418
(City, State, Zip Code)

(843) 926-0513
(Telephone Number)

Vinny Scott - OWNER
(Signature and Title, i.e, President, Owner)

Pursuant to Regulation 103-164 applications are to state clearly and concisely the justification for the proposed suspension of service.

Reason for Request for Suspension of Operations:

FINANCIAL DIFFICULTIES